## UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re:

Hugo L Cruz

Kimberly A Cruz

Debtor(s)

Case No. 16-27276

## CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 08/25/2016.
- 2) The plan was confirmed on 01/06/2017.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on 02/17/2017.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on  $\underline{07/28/2017}$ .
  - 5) The case was dismissed on 08/11/2017.
  - 6) Number of months from filing to last payment: 8.
  - 7) Number of months case was pending: <u>14</u>.
  - 8) Total value of assets abandoned by court order: <u>NA</u>.
  - 9) Total value of assets exempted: \$3,911.00.
  - 10) Amount of unsecured claims discharged without payment: \$0.00.
  - 11) All checks distributed by the trustee relating to this case have cleared the bank.

## Receipts:

Total paid by or on behalf of the debtor \$7,182.00 Less amount refunded to debtor \$0.00

NET RECEIPTS: \$7,182.00

## **Expenses of Administration:**

Attorney's Fees Paid Through the Plan \$3,500.00
Court Costs \$0.00
Trustee Expenses & Compensation \$345.74
Other \$0.00

TOTAL EXPENSES OF ADMINISTRATION:

\$3,845.74

Attorney fees paid and disclosed by debtor: \$500.00

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Scheduled Creditors:						
Creditor		Claim	Claim	Claim	Principal	Int.
Name	Class	Scheduled	Asserted	Allowed	Paid	Paid
BECKET & LEE LLP	Unsecured	424.00	512.50	512.50	0.00	0.00
CAPITAL ONE BANK USA	Unsecured	452.00	575.80	575.80	0.00	0.00
CAPITAL ONE BANK USA	Unsecured	393.00	400.93	400.93	0.00	0.00
ILLINOIS DEPT OF REVENUE	Unsecured	NA	86.28	86.28	0.00	0.00
ILLINOIS DEPT OF REVENUE	Priority	344.00	258.39	258.39	0.00	0.00
INTERNAL REVENUE SERVICE	Unsecured	NA	80.54	80.54	0.00	0.00
INTERNAL REVENUE SERVICE	Priority	1,712.00	1,613.10	1,613.10	0.00	0.00
JEFFERSON CAPITAL SYSTEMS	Unsecured	433.00	433.84	433.84	0.00	0.00
NPRTO ILLINOIS	Unsecured	1,889.00	1,889.59	1,889.59	0.00	0.00
OCWEN LOAN SERVICING LLC	Secured	2,227.03	490.75	490.75	490.75	0.00
OCWEN LOAN SERVICING LLC	Secured	0.00	0.00	0.00	0.00	0.00
PORTFOLIO RECOVERY ASSOC	Secured	8,170.40	8,170.40	8,170.40	310.04	144.49
PRESTIGE FINANCIAL SERVICES	Secured	25,933.30	25,933.30	25,933.30	1,932.41	458.57
PRESTIGE FINANCIAL SERVICES	Unsecured	NA	0.01	0.01	0.00	0.00
QUANTUM3 GROUP	Unsecured	991.00	398.28	398.28	0.00	0.00
QUANTUM3 GROUP	Unsecured	572.00	582.37	582.37	0.00	0.00
QUANTUM3 GROUP	Unsecured	467.00	524.93	524.93	0.00	0.00
DIVERSIFIED CONSULTANTS	Unsecured	57.00	NA	NA	0.00	0.00
CASH FAIRY	Unsecured	25.00	NA	NA	0.00	0.00
CBNA	Unsecured	624.00	NA	NA	0.00	0.00
GOLDEN VALLEY LENDING	Unsecured	279.00	NA	NA	0.00	0.00
GREENLINE LOANS	Unsecured	100.00	NA	NA	0.00	0.00
HARRIS AND HARRIS	Unsecured	368.00	NA	NA	0.00	0.00
JOHN T MAGEE	Unsecured	346.00	NA	NA	0.00	0.00
ADVOCATE HEALTHCARE	Unsecured	606.00	NA	NA	0.00	0.00
ALL FAMILY DENTAL AND ORTHOD	Unsecured	83.00	NA	NA	0.00	0.00

Scheduled Creditors:						
Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
ALL KIDS	Unsecured	120.00	NA	NA	0.00	0.00
ALLERGY AND ASTHMA CONSULTA	Unsecured	1,065.00	NA	NA	0.00	0.00
BESTBUY	Unsecured	228.00	NA	NA	0.00	0.00
PROVIDA FAMILY MEDICENE	Unsecured	375.00	NA	NA	0.00	0.00
RCVL PER MNG/SPRINT	Unsecured	1,166.00	NA	NA	0.00	0.00
ROSALING FRANKLIN UNIVERSITY F	Unsecured	60.00	NA	NA	0.00	0.00
SLEEP MANAGEMENT SOLUTIONS	Unsecured	37.00	NA	NA	0.00	0.00
THE VILLAGE OF ROUND LAKE PARI	Unsecured	50.00	NA	NA	0.00	0.00
TRANSWORLD SYSTEM/CARECENTF	Unsecured	358.00	NA	NA	0.00	0.00
LAB CORP	Unsecured	38.00	NA	NA	0.00	0.00
LAKE COUNTY HEALTH DEPT	Unsecured	491.00	NA	NA	0.00	0.00
LCA COLLECTIONS	Unsecured	38.00	NA	NA	0.00	0.00
MABT/CONTFIN	Unsecured	722.00	NA	NA	0.00	0.00
MCSI INC	Unsecured	400.00	NA	NA	0.00	0.00
MID AMERICA BANK AND TRUST	Unsecured	339.00	NA	NA	0.00	0.00
NORTHSHORE UNIVERSITY HEALTH	Unsecured	252.00	NA	NA	0.00	0.00
NORTHWESTERN MEDICINE	Unsecured	129.00	NA	NA	0.00	0.00
OPORTUN/PROGRESO	Unsecured	847.00	NA	NA	0.00	0.00
PEDIATRIC AND FAMILY DENTAL	Unsecured	44.00	NA	NA	0.00	0.00

Claim	Principal	Interest
Allowed	<u>Paid</u>	Paid
\$0.00	\$0.00	\$0.00
\$490.75	\$490.75	\$0.00
\$34,103.70	\$2,242.45	\$603.06
\$0.00	\$0.00	\$0.00
\$34,594.45	\$2,733.20	\$603.06
\$0.00	\$0.00	\$0.00
\$0.00	\$0.00	\$0.00
\$1,871.49	\$0.00	\$0.00
\$1,871.49	\$0.00	\$0.00
\$5,485.07	\$0.00	\$0.00
	\$0.00 \$490.75 \$34,103.70 \$0.00 \$34,594.45 \$0.00 \$0.00 \$1,871.49 \$1,871.49	Allowed       Paid         \$0.00       \$0.00         \$490.75       \$490.75         \$34,103.70       \$2,242.45         \$0.00       \$0.00         \$34,594.45       \$2,733.20         \$0.00       \$0.00         \$0.00       \$0.00         \$1,871.49       \$0.00         \$1,871.49       \$0.00         \$0.00       \$0.00

Disbursements:		
Expenses of Administration Disbursements to Creditors	\$3,845.74 \$3,336.26	
TOTAL DISBURSEMENTS :		<u>\$7,182.00</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 10/13/2017 By: /s/ Glenn Stearns
Trustee

**STATEMENT**: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.